Ambulance Stretcher/Wheel Chair Bus Activation

- 1. Notify Dietrich Bus Service
 - a. Indicate the following
 - i. Situation summary and nature of the mission
 - ii. Location of the mission and person to whom to report
 - iii. Date and time needed
 - iv. Anticipated duration of the mission
 - v. If overnight stay, arrangements made or options for lodging (e.g., shelter).
 - vi. Number of drivers needed for each bus (two drivers permit 24/7 operation)
 - vii. Type (wheel chair or stretcher) and quantity of buses required
 - viii. Items which should be included on the bus
 - ix. Routing information including pickup and drop off sequence, mileage, time and rest periods
 - x. Known road closures or safety issues in response area
 - xi. Other instructions
 - 1. Communication protocols
 - 2. GPS localization
 - 3. Recording number of patients loading and unloading at each location
 - b. Obtain estimated time of arrival of buses at response location
- While Dietrich is completing their bus conversion, Dietrich should notify the DOC every two hours on their rate of progress and update the DOC on their estimated time of arrival
- 3. Prior to departing from Dietrich Bus Service, Dietrich needs to confirm the following with the DOC
 - a. Configuration of each bus
 - i. Number of stretcher or wheel chair positions
 - ii. Installation of the oxygen tanks, hose, regulators
 - iii. Presence of loading ramp and support braces
 - b. Status of medical supplies on board (wheel chair kits are different than stretcher kits)
 - c. Status of communications equipment on board (State Cell Phones with GIS)
 - i. Assure cell phones are turned on, chargers (110 and 12 volt) are on board and cell phones always remain on
 - 1. Assure drivers are familiar with cell phone operation
 - ii. Assure DOC has names of drivers and cell phone numbers for each driver

- iii. Have state radio hand held radios and chargers on board and the radios are turned on
 - 1. Assure drivers are familiar with radio operation
- 4. Notify patient care staff where they can meet the bus (vehicle staging)
 - a. Assure the patient care staff are oriented to their mission
 - b. Emergency medical procedures
 - c. Toileting and DOC assistance with locations
- 5. When to communicate with the DOC
 - a. Mechanical problems
 - b. Route change
 - c. Patient problems
 - d. Staffing problems
 - e. Substantial delay en route
 - f. Change in number of patients picked up at a location

TRANSPORTATION	MISSION SUMMARY
Date:	Time and Date Needed:
Situation Summany	
Situation Summary:	
NA:	
Mission:	
Location of mission:	
Lodging arrangements or lodging options:	
Number of stretcher buses requested:	
Niverban of tub calabain by a a narrow stady	
Number of wheelchair buses requested:	
Number of drivers per bus requested:	
Road Closures and Safety:	
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Instructions 1. Confirm that each of the following is	on the hus
a. Oxygen bottles, hoses, regula	
b. Medical materials	
c. Loading ramps and braces	
d. Radio with charger for contact	cting state radio
e. State provided cell phone wit	h GPS tracking
f. Food and water	
Above material should be loaded at	·
Keep state provided cell phones and	
	patients loaded or unloaded at each site is
correct according to information pro-	vide. If number is not correct, notify the

- DOC (701.328.1326) before departing that location.

 5. Check-in with DOC (701.328.1326) about every two hours.
- 6. In the event of a medical emergency, defer to medical providers on bus. Driver should also call DOC (701.328.1326).
- 7. Patients may require toileting in route. If bus needs a location for toileting non-ambulatory residents, call the DOC for assistance (701.328.1326).
- 8. Notify the DOC (701.328.1326) for problems (mechanical, staffing, patients, delay or route change).
- 9. Drivers need personal belongings for overnight stay if indicated

		I	ROUTING IN	NFORMAT	ION			
Bus #	Capacity:	Type: □ Strete	cher □ W/C	Cell Pho	ne #:	Req Start Time:		
	From	То	Pickup #	Drop Off#	Distance	Time	Elapsed w/ loading	
-								
			ROUTING IN					
Due #	Consoitu					Pog	Start Time.	
Bus #	Capacity:	Type: □ Strete	Pickup #	Drop Off #	ne #: Distance	Time	Start Time: Elapsed w/ loading	
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			ROUTING IN	NFORMAT	ION			
Bus #	Capacity:	Type: □ Streto	cher □ W/C	Cell Phone #:		Req Start Time:		
	From	То	Pickup #	Drop Off#	Distance	Time	Elapsed w/ loading	

			POLITING I	NEODMATI	ON		
Bus #	Capacity:	ROUTING INFORMATION Type: □ Stretcher □ W/C Cell Phone #:				Req Start Time:	
	From	To	Pickup #	Drop Off #	Distance	Time	Elapsed w/ loading
Bus #	ROUTING INFORMATION Sus # Capacity: Type: Stretcher W/C Cell Phone #:						Start Time:
Dus #	From	To	Pickup #	Drop Off #	Distance	Time	Elapsed w/ loading
			ROUTING I		ON		
Bus #	Capacity:	Type: □ Stre				Rea	Start Time:
	From	То	Pickup #	Drop Off#	Distance	Time	Elapsed w/ loading